

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION**

IN RE:

AREU STUDIOS, LLC,

Debtor.

CHAPTER 11

CASE NO. 20-71228-PMB

**DEBTOR'S MONTHLY OPERATING REPORT
FOR THE PERIOD FROM APRIL 1, 2021 TO APRIL 30, 2021**

COMES NOW the above-named Debtor and files this Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

This 22nd day of June, 2021.

JONES & WALDEN LLC

/s/ Cameron M. McCord
Cameron M. McCord
Georgia Bar No. 143065
cmccord@joneswalden.com
699 Piedmont Avenue, NE
Atlanta, Georgia 30308
(404) 564-9300 Telephone
(404) 564-9301 Facsimile
Attorney for Debtor

Debtor's Address:
Areu Studios, LLC
3133 Continental Colony Parkway SW
Atlanta, GA 30331

SCHEDULE OF RECEIPTS AND DISBURSEMENTS
FOR THE PERIOD BEGINNING 4/1/2021 AND ENDING 4/30/2021

Name of Debtor: Areu Studios, LLC
 Date of Petition: October 29, 2020

Case Number 20-71228-PMB

	<u>CURRENT MONTH</u>	<u>CUMULATIVE PETITION TO DATE</u>
1. FUNDS AT BEGINNING OF PERIOD	<u>\$176,706.68 (a)</u>	<u>\$89,882.13 (b)</u>
2. RECEIPTS:		
A. Cash Sales	<u>\$424,304.95</u>	<u>\$1,914,098.85</u>
Minus: Cash Refunds	<u>(-) \$0.00</u>	<u>\$0.00</u>
Net Cash Sales	<u>\$424,304.95</u>	<u>\$1,914,098.85</u>
B. Accounts Receivable	<u>\$0.00</u>	<u>\$0.00</u>
C. Other Receipts (See MOR-3)	<u>\$79.99</u>	<u>\$1,022.41</u>
(If you receive rental income, * Intercompany you must attach a rent roll.) Transfer	<u>\$160.00</u>	<u>\$160.00</u>
3. TOTAL RECEIPTS (Lines 2A+2B+2C)	<u>\$424,384.94</u>	<u>\$1,420,121.26</u>
4. TOTAL FUNDS AVAILABLE FOR OPERATIONS (Line 1 + Line 3)	<u>\$601,251.62</u>	<u>\$1,510,163.39</u>
5. DISBURSEMENTS		
A. Advertising	<u>\$0.00</u>	<u>\$0.00</u>
B. Bank Charges	<u>\$301.00</u>	<u>\$812.00</u>
C. Contract Labor	<u>\$45,833.74</u>	<u>\$137,500.42</u>
D. Fixed Asset Payments (not incl. in "N")	<u>\$0.00</u>	<u>\$0.00</u>
E. Insurance	<u>\$16,636.31</u>	<u>\$89,693.57</u>
F. Inventory Payments (See Attach. 2)	<u>\$0.00</u>	<u>\$0.00</u>
G. Leases	<u>\$0.00</u>	<u>\$0.00</u>
H. Manufacturing Supplies	<u>\$0.00</u>	<u>\$0.00</u>
I. Office Supplies	<u>\$231.97</u>	<u>\$2,082.16</u>
J. Payroll - Net (See Attachment 4B)	<u>\$69,293.90</u>	<u>\$297,074.50</u>
K. Professional Fees (Accounting & Legal)	<u>\$0.00</u>	<u>\$1,000.00</u>
L. Rent	<u>\$0.00</u>	<u>\$0.00</u>
M. Repairs & Maintenance	<u>\$715.91</u>	<u>\$37,262.09</u>
N. Secured Creditor Payments (See Attach. 2)	<u>\$0.00</u>	<u>\$170,000.00</u>
O. Taxes Paid - Payroll (See Attachment 4C)	<u>\$0.00</u>	<u>\$0.00</u>
P. Taxes Paid - Sales & Use (See Attachment 4C)	<u>\$0.00</u>	<u>\$0.00</u>
Q. Taxes Paid - Other (See Attachment 4C)	<u>\$0.00</u>	<u>\$0.00</u>
R. Telephone	<u>\$850.20</u>	<u>\$7,283.80</u>
S. Travel & Entertainment	<u>\$285.00</u>	<u>\$2,932.68</u>
Y. U.S. Trustee Quarterly Fees	<u>\$0.00</u>	<u>\$1,300.00</u>
U. Utilities	<u>\$31,919.42</u>	<u>\$159,218.78</u>
V. Vehicle Expenses	<u>\$0.00</u>	<u>\$0.00</u>
W. Other Operating Expenses (See MOR-3)	<u>\$32,070.69</u>	<u>\$166,889.91</u>
6. TOTAL DISBURSEMENTS (Sum of 5A thru W)	<u>\$198,138.14</u>	<u>\$1,073,049.91</u>
7. Intercompany Transfers	<u>\$0.00 (c)</u>	<u>\$34,000.00 (c)</u>
8. ENDING BALANCE (Line 4 Minus Line 6)	<u>\$403,113.48</u>	<u>\$403,113.48</u>

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This ____ day of _____, 20__.


 (Signature)

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) This figure will not change from month to month. It is always the amount of funds on hand as of the date of the petition.

(c) These two amounts will always be the same if form is completed correctly.

MONTHLY SCHEDULE OF RECEIPTS AND DISBURSEMENTS (cont'd)

Detail of Other Receipts and Other Disbursements

OTHER RECEIPTS:

Describe Each Item of Other Receipt and List Amount of Receipt. Write totals on Page MOR-2, Line 2C.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
See attached		
TOTAL OTHER RECEIPTS	<u>\$79.99</u>	<u>\$1,022.41</u>

“Other Receipts” includes Loans from Insiders and other sources (i.e. Officer/Owner, related parties directors, related corporations, etc.). Please describe below:

<u>Loan Amount</u>	<u>Source of Funds</u>	<u>Purpose</u>	<u>Repayment Schedule</u>

OTHER DISBURSEMENTS:

Describe Each Item of Other Disbursement and List Amount of Disbursement. Write totals on Page MOR-2, Line 5W.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
See attached		
TOTAL OTHER DISBURSEMENTS	<u>\$32,070.69</u>	<u>\$166,889.91</u>

NOTE: Attach a current Balance Sheet and Income (Profit & Loss) Statement.

OTHER RECEIPTS

Description	Cumulative	
	Current Month	Petition to Date
Amazon refund	\$0.00	\$23.30
Green Guard	\$0.00	\$185.85
Enterprise Rent-A-Car	\$0.00	\$65.19
Ozzie Areu (to open DIP account)	\$0.00	\$100.00
Studio Concierge	\$0.00	\$568.08
McAfee return	\$79.99	\$79.99
	\$79.99	\$1,022.41

OTHER DISBURSEMENTS

Description	Current Month	Cumulative Petition to Date
Adobe Acropro	\$33.98	\$501.72
Adobe Creative	\$0.00	\$105.98
Amazon	\$0.00	\$3,969.92
Apple	\$9.99	\$155.93
Biz Card, Inc.	\$0.00	\$600.00
Doordash	\$0.00	\$254.13
Flywheel	\$0.00	\$150.00
Go Daddy	\$505.46	\$4,240.39
H. Media Collective	\$0.00	\$750.00
Logmein	\$0.00	\$1,890.00
Paychex (fee)	\$0.00	\$108.90
Postmates	\$0.00	\$109.58
Prestige Design	\$0.00	\$1,101.60
Subway	\$0.00	\$35.40
Rinehart Security	\$14,172.00	\$132,672.00
Visa	\$0.00	\$85.10
VSC	\$0.00	\$2,440.15
GA Corporate Registration	\$0.00	\$250.00
FileLate	\$0.00	\$119.85
ADI-C1	\$2,418.71	\$2,418.71
Robl Law Group (unsecured creditor plan payments)	\$14,930.55	\$14,930.55
	\$32,070.69	\$166,889.91

ATTACHMENT 1

MONTHLY ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

ACCOUNTS RECEIVABLE AT PETITION DATE: \$0.00

ACCOUNTS RECEIVABLE RECONCILIATION

(Include all accounts receivable, pre-petition and post-petition, including charge card sales which have not been received):

Beginning of Month Balance	\$ 0.00	(a)
PLUS: Current Month New Billings	0.00	
MINUS: Collection During the Month	\$ 0.00	(b)
PLUS/MINUS: Adjustments or Writeoffs	\$ 0.00	*
End of Month Balance	\$ 0.00	(c)

*For any adjustments or Write-offs provide explanation and supporting documentation, if applicable:

POST PETITION ACCOUNTS RECEIVABLE AGING

(Show the total for each aging category for all accounts receivable)

0-30 Days	31-60 Days	61-90 Days	Over 90Days	Total
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____ (c)

For any receivables in the “Over 90 Days” category, please provide the following:

<u>Customer</u>	<u>Receivable Date</u>	<u>Status</u> (Collection efforts taken, estimate of collectibility, write-off, disputed account, etc.)

- (a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.
- (b) This must equal the number reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 2B).
- (c) These two amounts must equal.

ATTACHMENT 2

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

In the space below list all invoices or bills incurred and not paid since the filing of the petition. Do not include amounts owed prior to filing the petition. In the alternative, a computer generated list of payables may be attached provided all information requested below is included.

POST-PETITION ACCOUNTS PAYABLE

<u>Date</u>	<u>Days</u>	<u>Vendor</u>	<u>Description</u>	<u>Amount</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL AMOUNT				\$0.00 (b)

☐ **Check here if pre-petition debts have been paid. Attach an explanation and copies of supporting documentation.**

ACCOUNTS PAYABLE RECONCILIATION (Post Petition Unsecured Debt Only)

Opening Balance	\$ _____ (a)
PLUS: New Indebtedness Incurred This Month	\$ _____
MINUS: Amount Paid on Post Petition, Accounts Payable This Month	\$ _____
PLUS/MINUS: Adjustments	\$ _____ *
Ending Month Balance	\$ _____ (c)

*For any adjustments provide explanation and supporting documentation, if applicable.

SECURED PAYMENTS REPORT

List the status of Payments to Secured Creditors and Lessors (Post Petition Only). If you have entered into a modification agreement with a secured creditor/lessor, consult with your attorney and the United States Trustee Program prior to completing this section).

Secured Creditor/ Lessor	Date Payment Due This Month	Amount Paid This Month	Number of Post Petition Payments Delinquent	Total Amount of Post Petition Payments Delinquent
TOTAL		(d)		

(a) This number is carried forward from last month's report. For the first report only, this number will be zero.

(b, c) The total of line (b) must equal line (c).

(d) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5N).

ATTACHMENT 3**INVENTORY AND FIXED ASSETS REPORT**Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMBReporting Period beginning 4/1/2021 Period ending 4/30/2021**INVENTORY REPORT** N/AINVENTORY BALANCE AT PETITION DATE: \$ \$0.00

INVENTORY RECONCILIATION:

Inventory Balance at Beginning of Month	\$	_____	(a)
PLUS: Inventory Purchased During Month	\$	_____	
MINUS: Inventory Used or Sold	\$	_____	
PLUS/MINUS: Adjustments or Write-downs	\$	_____	*
Inventory on Hand at End of Month	\$	_____	

METHOD OF COSTING INVENTORY: _____

*For any adjustments or write-downs provide explanation and supporting documentation, if applicable.

INVENTORY AGING

Less than 6 months old	6 months to 2 years old	Greater than 2 years old	Considered Obsolete	Total Inventory
_____ %	_____ %	_____ %	_____ %	= _____ 100%*

* Aging Percentages must equal 100%.

☐ Check here if inventory contains perishable items.

Description of Obsolete Inventory: _____

FIXED ASSET REPORT N/AFIXED ASSETS FAIR MARKET VALUE AT PETITION DATE: _____(b)
(Includes Property, Plant and Equipment)

BRIEF DESCRIPTION (First Report Only): _____

FIXED ASSETS RECONCILIATION:

Fixed Asset Book Value at Beginning of Month	\$	_____	(a)(b)
MINUS: Depreciation Expense	\$	_____	
PLUS: New Purchases	\$	_____	
PLUS/MINUS: Adjustments or Write-downs	\$	_____	*
Ending Monthly Balance	\$	_____	

*For any adjustments or write-downs, provide explanation and supporting documentation, if applicable.

BRIEF DESCRIPTION OF FIXED ASSETS PURCHASED OR DISPOSED OF DURING THE REPORTING PERIOD: _____

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) Fair Market Value is the amount at which fixed assets could be sold under current economic conditions. Book Value is the cost of the fixed assets minus accumulated depreciation and other adjustments.

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-pmb

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: United Community Bank BRANCH: _____

ACCOUNT NAME: Areu Studios LLC DIP ACCOUNT NUMBER: x 3081

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$ 8,174.22
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not includes items reported as Petty Cash on Attachment 4D: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

“Total Amount of Outstanding Checks and other debits”, listed above, includes:

\$ _____ Transferred to Payroll Account
\$ _____ Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as “Ending Balance” on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

CHECK REGISTER - OPERATING ACCOUNT

PURPOSE OF ACCOUNT: OPERATING

<u>DATE</u>	CHECK <u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
	See attached			
TOTAL				\$



200 CHEROKEE STREET NE • MARIETTA GA 30060
TELEPHONE: 800-822-2651 (72)
RETURN SERVICE REQUESTED

Account Number XXXXXX3081
Statement Date 04/30/2021
Balance 8,174.22
Enclosures 16
Page 1 of 4

49690 1 AB 0.425 P:49690 / T:177 / S:

AREU STUDIOS LLC
DEBTOR IN POSSESSION CASE #20-71228-PMB
3133 CONTINENTAL COLONY PKWY SW
ATLANTA GA 30331-3109

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BUSINESS FREEDOM ACCOUNT XXXXXX3081

MINIMUM BALANCE	5,130.84	LAST STATEMENT 03/31/21	26,155.86
AVG AVAILABLE BALANCE	11,408.88	3 CREDITS	15,079.99
AVERAGE BALANCE	11,408.88	31 DEBITS	33,061.63
		THIS STATEMENT 04/30/21	8,174.22

OTHER CREDITS

DESCRIPTION	DATE	AMOUNT
XX5424 DDA POS RETURN 04/08 20:30 MCAFEE *WWW.MCAF	04/09	79.99
866-622-3911 TX 56704214 7636		
WIRE/IN-202110301159;ORG GREENBERG GEORGIA FILM AND TV	04/13	4,000.00
STUDI;REF PAYROLL		
WIRE/IN-20211700041;ORG GREENBERG GEORGIA FILM AND TV	04/27	11,000.00
STUDI		

CHECKS

CHECK #	DATE	AMOUNT	CHECK #	DATE	AMOUNT	CHECK #	DATE	AMOUNT
14	04/01	1,336.73	20	04/19	1,185.78	27	04/30	1,278.86
15	04/01	1,488.20	21	04/15	1,121.41	28	04/30	1,623.29
16	04/01	1,623.28	22	04/20	1,623.28	29*	04/30	1,141.78
17	04/02	1,197.28	23	04/16	1,331.86	995013	04/05	4,500.00
18	04/01	2,344.38	24	04/15	2,344.38			
19	04/15	2,693.79	25*	04/30	2,693.80			

(*) INDICATES A GAP IN CHECK NUMBER SEQUENCE

* * * C O N T I N U E D * * *

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Member
FDIC



Account Number	XXXXXX3081
Statement Date	04/30/2021
Balance	8,174.22
Enclosures	16
Page	2 of 4

BUSINESS FREEDOM ACCOUNT XXXXXX3081**OTHER DEBITS**

DESCRIPTION	DATE	AMOUNT
XX5424 DDA POS PURCH 04/03 05:46 ULINE *SHIP SUP 800-295-5510 WI 20808273 006891	04/05	715.91
XX5424 DDA POS PURCH 04/08 23:21 INTUIT * CL.INTUIT.COM CA 82568179 664697	04/09	35.00
XX5424 DDA POS PURCH 04/08 21:39 MCAFEE *WWW.MCAF 866-622-3911 TX 56700659 15002	04/09	79.99
WIRE FEE-202110301159;INCOMING WIRE FEE - 072	04/13	14.00
XX5424 DDA POS PURCH 04/12 20:30 NORTON *NP134157 NORTON.COM/NS AZ 16917727 6355	04/13	49.99
PAYCHEX EIB INVOICE X92069900001989	04/14	1,084.95
XX5424 DDA POS PURCH 04/18 05:03 VZWRLSS*APOCC VI 800-922-0204 FL 24589896 59866	04/19	95.09
XX5424 DDA POS PURCH 04/17 22:29 DNH*GODADDY.COM 480-505-8855 AZ 36597244 691364	04/19	239.71
WIRE FEE-202111700041;INCOMING WIRE FEE - 072	04/27	14.00
XX5424 DDA POS PURCH 04/27 05:08 MSFT * E0600ECM8 MSBILL.INFO WA 25937453 490746	04/27	55.00
XX5424 DDA POS PURCH 04/27 02:31 DNH*GODADDY.COM 480-505-8855 AZ 53692986 080771	04/28	19.98
XX5424 DDA POS PURCH 04/28 01:55 DNH*GODADDY.COM 480-505-8855 AZ 38979546 929061	04/29	20.98
PAYCHEX EIB INVOICE X92284800001304	04/29	1,071.95
Paper Statement Fee	04/30	3.00
XX5424 DDA POS PURCH 04/29 21:39 ADOBE ACROPRO SU 8004438158 CA 00575374 654045	04/30	33.98

DAILY BALANCE

DATE	BALANCE	DATE	BALANCE	DATE	BALANCE
04/01	19,363.27	04/14	15,766.14	04/27	16,061.84
04/02	18,165.99	04/15	9,606.56	04/28	16,041.86
04/05	12,950.08	04/16	8,274.70	04/29	14,948.93
04/09	12,915.08	04/19	6,754.12	04/30	8,174.22
04/13	16,851.09	04/20	5,130.84		

04/01/2021 CHECK# 14 \$1336.73

ARREY STUDIOS LLC
1811-7475
EE ID: 9
03/31/2021 14
PAY TO THE ORDER OF RONALD BELL
3850 RIVERVIEW BLVD
ELLENWOOD GA 30294
\$1336.73
ONE THOUSAND THREE HUNDRED THIRTY SIX AND 73/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/19/2021 CHECK# 20 \$1185.78

ARREY STUDIOS LLC
1811-7475
EE ID: 9
04/19/2021 20
PAY TO THE ORDER OF RONALD BELL
3850 RIVERVIEW BLVD
ELLENWOOD GA 30294
\$1185.78
ONE THOUSAND ONE HUNDRED EIGHTY FIVE AND 78/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/01/2021 CHECK# 15 \$1488.20

ARREY STUDIOS LLC
1811-7475
EE ID: 1
03/31/2021 15
PAY TO THE ORDER OF EVENS LOUISANT
5200 GREAT MEADOWS
LITHONIA GA 30038
\$1488.20
ONE THOUSAND FOUR HUNDRED EIGHTY EIGHT AND 20/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/15/2021 CHECK# 21 \$1121.41

ARREY STUDIOS LLC
1811-7475
EE ID: 1
04/15/2021 21
PAY TO THE ORDER OF EVENS LOUISANT
5200 GREAT MEADOWS
LITHONIA GA 30038
\$1121.41
ONE THOUSAND ONE HUNDRED TWENTY ONE AND 41/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/01/2021 CHECK# 16 \$1623.28

ARREY STUDIOS LLC
1811-7475
EE ID: 5
03/31/2021 16
PAY TO THE ORDER OF DANIELA POSSO
2040 HUNTERS TRAIL DR
LAWRENCEVILLE GA 30043
\$1623.28
ONE THOUSAND SIX HUNDRED TWENTY THREE AND 28/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/20/2021 CHECK# 22 \$1623.28

ARREY STUDIOS LLC
1811-7475
EE ID: 5
04/20/2021 22
PAY TO THE ORDER OF DANIELA POSSO
2040 HUNTERS TRAIL DR
LAWRENCEVILLE GA 30043
\$1623.28
ONE THOUSAND SIX HUNDRED TWENTY THREE AND 28/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/02/2021 CHECK# 17 \$1197.28

ARREY STUDIOS LLC
1811-7475
EE ID: 3
03/31/2021 17
PAY TO THE ORDER OF JARVIS O REED
980 TREESTREE CT APTS D
ATLANTA GA 30312
\$1197.28
ONE THOUSAND ONE HUNDRED NINETY SEVEN AND 28/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/16/2021 CHECK# 23 \$1331.86

ARREY STUDIOS LLC
1811-7475
EE ID: 3
04/16/2021 23
PAY TO THE ORDER OF JARVIS O REED
980 TREESTREE CT APTS D
ATLANTA GA 30312
\$1331.86
ONE THOUSAND THREE HUNDRED THIRTY ONE AND 86/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/01/2021 CHECK# 18 \$2344.38

ARREY STUDIOS LLC
1811-7475
EE ID: 4
03/31/2021 18
PAY TO THE ORDER OF COLIN E WOODS
3397 KENLAND RD
SMYRNA GA 30082
\$2344.38
TWO THOUSAND THREE HUNDRED FORTY FOUR AND 38/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

04/15/2021 CHECK# 24 \$2344.38

ARREY STUDIOS LLC
1811-7475
EE ID: 4
04/15/2021 24
PAY TO THE ORDER OF COLIN E WOODS
3397 KENLAND RD
SMYRNA GA 30082
\$2344.38
TWO THOUSAND THREE HUNDRED FORTY FOUR AND 38/100 DOLLARS
UNITED COMMUNITY BANK
Olsen


04/15/2021 CHECK# 19 \$2693.79

ARREY STUDIOS LLC
1811-7475
EE ID: 2
04/15/2021 19
PAY TO THE ORDER OF MARIO AREU
1500 CHERRY DRIVE
AUSTELL GA 30106
\$2693.79
TWO THOUSAND SIX HUNDRED NINETY THREE AND 79/100 DOLLARS
UNITED COMMUNITY BANK
Olsen


04/30/2021 CHECK# 25 \$2693.80

ARREY STUDIOS LLC
1811-7475
EE ID: 2
04/30/2021 25
PAY TO THE ORDER OF MARIO AREU
1500 CHERRY DRIVE
AUSTELL GA 30106
\$2693.80
TWO THOUSAND SIX HUNDRED NINETY THREE AND 80/100 DOLLARS
UNITED COMMUNITY BANK
Olsen

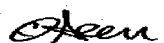
04/30/2021 CHECK# 27 \$1278.86

AREU STUDIOS LLC 990 Canyon Trail Dr Smyrna GA 30087		1811-7475 EE 10: 1	04/30/2021 27
PAY TO THE ORDER OF EVENS LOUSSAINT 5200 GREAT MEADOWS LITHONIA GA 30038		**\$1278.86** AMOUNT	ONE THOUSAND TWO HUNDRED SEVENTY EIGHT AND 86/100 DOLLARS
UNITED COMMUNITY BANK			AUTHORIZED SIGNATURE(S)

04/30/2021 CHECK# 28 \$1623.29

AREU STUDIOS LLC 990 Canyon Trail Dr Smyrna GA 30087		1811-7475 EE 10: 5	04/30/2021 28
PAY TO THE ORDER OF DANIELA POSSO 2040 HUNTERS TRAIL DR LAWRENCEVILLE GA 30043		**\$1623.29** AMOUNT	ONE THOUSAND SIX HUNDRED TWENTY THREE AND 29/100 DOLLARS
UNITED COMMUNITY BANK			AUTHORIZED SIGNATURE(S)

04/30/2021 CHECK# 29 \$1141.78

AREU STUDIOS LLC 990 Canyon Trail Dr Smyrna GA 30087		1811-7475 EE 10: 3	04/30/2021 29
PAY TO THE ORDER OF JARVARIS Q REED 980 THREESTREET CT APTS D ATLANTA GA 30312		**\$1141.78** AMOUNT	ONE THOUSAND ONE HUNDRED FORTY ONE AND 78/100 DOLLARS
UNITED COMMUNITY BANK			AUTHORIZED SIGNATURE(S)

04/05/2021 CHECK# 995013 \$4500.00

Account: C-14745 AREU STUDIOS LLC 990 CANYON TRAIL DR ATLANTA, GA 30087		Please Direct Any Questions To (800) 245-2908 Online Bill Payment Processing Center	\$4,500.00 1284611 0000995013 April 02, 2021
MEMO: 3 months service UNITED COMMUNITY BANK, INC. 02489 7348384 000099 000100021208267		DOLLARS	Pay FOUR THOUSAND FIVE HUNDRED AND 00/100
TO THE ORDER OF SCHONET DEPT LA 24489 PASADENA, CA 91105-4489	02476	\$ *****4,500.00	Void After 180 DAYS Signature On File This check has been authorized by your depositor

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: Areu Studios LLC ACCOUNT NUMBER: x 6983

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$ 18.01
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not includes items reported as Petty Cash on Attachment 4D: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

“Total Amount of Outstanding Checks and other debits”, listed above, includes:

\$ _____ Transferred to Payroll Account
\$ _____ Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as “Ending Balance” on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5A

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: Areu Studios LLC

ACCOUNT NUMBER: x 6983

PURPOSE OF ACCOUNT: OPERATING

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

	CHECK			
<u>DATE</u>	<u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
	See attached			
TOTAL				\$ _____



P.O. Box 15284
Wilmington, DE 19850

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For Business

Customer service information

1.888.BUSINESS (1.888.287.4637)

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

AREU STUDIOS LLC
3133 CONTINENTAL COLONY PKWY SW
ATLANTA, GA 30331-3109

Your Business Advantage Relationship Banking Preferred Rewards for Bus Platinum Honors

for April 1, 2021 to April 30, 2021

Account number: 6983

AREU STUDIOS LLC

Account summary

Beginning balance on April 1, 2021	\$145,550.65
Deposits and other credits	48,837.81
Withdrawals and other debits	-194,100.45
Checks	-0.00
Service fees	-270.00
Ending balance on April 30, 2021	\$18.01

of deposits/credits: 5

of withdrawals/debits: 22

of items-previous cycle¹: 1

of days in cycle: 30

Average ledger balance: \$6,573.17

¹Includes checks paid, deposited items & other debits

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SSM-12-20-0002.B | 3340797

IMPORTANT INFORMATION: BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Equal Housing Lender



Your checking account

AREU STUDIOS LLC | Account # 6983 | April 1, 2021 to April 30, 2021

Deposits and other credits

Date	Description	Amount
04/06/21	Online Banking transfer from CHK 8574 Confirmation# 3573645224	12.00
04/07/21	Online Banking transfer from CHK 8574 Confirmation# 2580943808	50.00
04/12/21	Online Banking transfer from CHK 8574 Confirmation# 7225327949	98.00
04/21/21	BOFA FIN CTR 04/21 #000005067 DEPOSIT	1,535.00
04/22/21	Counter Credit	47,142.81
Total deposits and other credits		\$48,837.81

Withdrawals and other debits

Date	Description	Amount
04/01/21	WIRE TYPE:WIRE OUT DATE:210401 TIME:1523 ET TRN:2021040100487928 SERVICE REF:018516 BNF:GREENBERG GEORGIA FILM ID:80009551088 BNF BK:F IRST REPUBLIC BANK ID:321081669 PMT DET:2104011523 000042and TV Studio Holdings LLC. /ACC/, PHN/Green	-143,000.00
04/02/21	GO DADDY DES:WEB ORDER ID:1980309637 INDN:Areu CO ID:1210002031 CCD	-49.96
04/05/21	GO DADDY DES:WEB ORDER ID:1980744907 INDN:Areu CO ID:1210002031 CCD	-20.98
04/05/21	GO DADDY DES:WEB ORDER ID:1981335517 INDN:Areu CO ID:1210002031 CCD	-20.98
04/06/21	GO DADDY DES:WEB ORDER ID:1981922557 INDN:Areu CO ID:1210002031 CCD	-21.98
04/07/21	GO DADDY DES:WEB ORDER ID:1982405877 INDN:Areu CO ID:1210002031 CCD	-49.95
04/12/21	GO DADDY DES:WEB ORDER ID:1984193467 INDN:Areu CO ID:1210002031 CCD	-27.97
04/23/21	GO DADDY.COM,LLC DES:RETRY PYMT ID:000000000999999 INDN:AREU 1003 26926809 CO ID:1953582355 CCD	-16.98
04/23/21	GO DADDY.COM,LLC DES:RETRY PYMT ID:000000000999999 INDN:AREU 1003 26927104 CO ID:1953582355 CCD	-15.99

continued on the next page

BANK OF AMERICA BUSINESS ADVANTAGE

What's on your mind?

Business owners like you can join the Bank of America® Advisory Panel to help us understand what you like and don't like. Enter code **SBDD** at bankofamerica.com/AdvisoryPanel to learn more and join.

Inclusion on the Advisory Panel subject to qualifications.

SSM-10-20-0074.B | 3255564

Withdrawals and other debits - continued

Date	Description	Amount
04/26/21	WIRE TYPE:WIRE OUT DATE:210426 TIME:1050 ET TRN:2021042600393783 SERVICE REF:007866 BNF:GREENBERG GEORGIA FILM AND ID:80009551088 BNF BK:FIRST REPUBLIC BANK ID:321081669 PMT DET:21 04261043000037TV STUDIO HOLDINGS LLC (Operating Ac	-48,326.07
04/26/21	PAYCHEX-OAB DES:RETRY PYMT ID:92224700000047X INDN:AREU STUDIOS LLC CO ID:1161124166 CCD	-108.90

Card account # XXXX XXXX XXXX 3914

04/02/21	CHECKCARD 0402 ADI-C1 800-545-6776 NY 55432861092200006456687 CKCD 5065 XXXXXXXXXXXXX3914 XXXX XXXX XXXX 3914	-2,418.71
04/22/21	CHECKCARD 0422 APPLE.COM/BILL 866-712-7753 CA 55432861112200667742702 RECURRING CKCD 5735 XXXXXXXXXXXXX3914 XXXX XXXX XXXX 3914	-9.99
04/28/21	CHECKCARD 0428 Dropbox Inc. San FranciscoCA 00000000000000000772597 RECURRING CKCD 4816 XXXXXXXXXXXXX3914 XXXX XXXX XXXX 3914	-11.99

Subtotal for card account # XXXX XXXX XXXX 3914 **-\$2,440.69**

Total withdrawals and other debits **-\$194,100.45**

Service fees

Your Overdraft and NSF: Returned Item fees for this statement period and year to date are shown below.

	Total for this period	Total year-to-date
Total Overdraft fees	\$0.00	\$0.00
Total NSF: Returned Item fees	\$210.00	\$210.00

We want to help you avoid overdraft and returned item fees. Here are a few ways to manage your account and stay on top of your balance:

- Set up Overdraft Protection in Online Banking to avoid declined transactions and save on overdraft fees
- Sign up for Alerts (footnote 1) to get an email or text message when your balance becomes low

Please call us or visit us if you have any questions or to discuss your options.

(footnote 1) You may elect to receive alerts via text or email. Bank of America does not charge for this service but your mobile carrier's message and data rates may apply. Delivery of alerts may be affected or delayed by your mobile carrier's coverage.

The Monthly Fee on your primary Business Advantage Relationship Banking account was waived for the statement period ending 03/31/21. A check mark below indicates the requirement(s) you have met to qualify for the Monthly Fee waiver on the account.

- ✓ \$15,000+ combined average monthly balance in linked business accounts has been met
- ✓ Become a member of Preferred Rewards for Business has been met

For information on how to open a new product, link an existing service to your account, or about Preferred Rewards for Business please call 1.888.BUSINESS or visit bankofamerica.com/smallbusiness.

Date	Transaction description	Amount
04/01/21	Wire Transfer Fee	-30.00
04/08/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-08	-35.00
04/09/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-09	-35.00
04/13/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-13	-35.00
04/14/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-14	-35.00
04/15/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-15	-35.00

continued on the next page



Your checking account

AREU STUDIOS LLC | Account # 6983 | April 1, 2021 to April 30, 2021

Service fees - continued

Date	Transaction description	Amount
04/20/21	NSF: RETURNED ITEM FEE FOR ACTIVITY OF 04-20	-35.00
04/26/21	Wire Transfer Fee	-30.00

Total service fees **-\$270.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

Daily ledger balances

Date	Balance (\$)	Date	Balance (\$)	Date	Balance (\$)
04/01	2,520.65	04/09	-69.91	04/21	1,395.12
04/02	51.98	04/12	0.12	04/22	48,527.94
04/05	10.02	04/13	-34.88	04/23	48,494.97
04/06	0.04	04/14	-69.88	04/26	30.00
04/07	0.09	04/15	-104.88	04/28	18.01
04/08	-34.91	04/20	-139.88		

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ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-pmb

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: Areu Studios, LLC ACCOUNT NUMBER: x 6559

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$ 0.17
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not includes items reported as Petty Cash on Attachment 4D: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

“Total Amount of Outstanding Checks and other debits”, listed above, includes:

\$ _____ Transferred to Payroll Account
\$ _____ Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as “Ending Balance” on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5A

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

NAME OF BANK: Bank of America BRANCH: _____

ACCOUNT NAME: Areu Studios, LLC

ACCOUNT NUMBER: x 6559

PURPOSE OF ACCOUNT: OPERATING

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

	CHECK			
<u>DATE</u>	<u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
	See attached			
TOTAL				\$



P.O. Box 15284
Wilmington, DE 19850

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1.888.BUSINESS (1.888.287.4637)

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P.O. Box 25118
Tampa, FL 33622-5118

AREU STUDIOS, LLC
3133 CONTINENTAL COLONY PKWY SW
ATLANTA, GA 30331-3109

Your Business Advantage Relationship Banking Preferred Rewards for Bus Platinum Honors

for April 1, 2021 to April 30, 2021

Account number: 6559

AREU STUDIOS, LLC

Account summary

Beginning balance on April 1, 2021	\$0.17
Deposits and other credits	0.00
Withdrawals and other debits	-0.00
Checks	-0.00
Service fees	-0.00
Ending balance on April 30, 2021	\$0.17

of deposits/credits: 0

of withdrawals/debits: 0

of items-previous cycle¹: 0

of days in cycle: 30

Average ledger balance: \$0.17

¹Includes checks paid, deposited items & other debits

BUSINESS ADVANTAGE

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All across the country, small business owners like you help strengthen the communities you serve, while providing opportunities for those who live there. During Small Business Month, we celebrate the drive and dedication that help enrich those around you. Thanks for all you do.

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SSM-12-20-0002.B | 3340797

IMPORTANT INFORMATION: BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Your checking account

AREU STUDIOS, LLC | Account

5559 | April 1, 2021 to April 30, 2021

Service fees

The Monthly Fee on your primary Business Advantage Relationship Banking account was waived for the statement period ending 03/31/21. A check mark below indicates the requirement(s) you have met to qualify for the Monthly Fee waiver on the account.

- ☐ \$15,000+ combined average monthly balance in linked business accounts has not been met
- ☒ Become a member of Preferred Rewards for Business has been met

For information on how to open a new product, link an existing service to your account, or about Preferred Rewards for Business please call 1.888.BUSINESS or visit bankofamerica.com/smallbusiness.

Daily ledger balances

Date	Balance (\$)
04/01	0.17

BANK OF AMERICA BUSINESS ADVANTAGE

What's on your mind?

Business owners like you can join the Bank of America® Advisory Panel to help us understand what you like and don't like. Enter code **SBDD** at bankofamerica.com/AdvisoryPanel to learn more and join.

Inclusion on the Advisory Panel subject to qualifications.

SSM-10-20-0074.B | 3255564

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ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-pmb

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: First Republic Bank BRANCH: _____

ACCOUNT NAME: Greenberg Georgia Film and TV Studio Holdings LLC (Operating) ACCOUNT NUMBER: x 1088

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$ 306,293.94
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not includes items reported as Petty Cash on Attachment 4D: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

“Total Amount of Outstanding Checks and other debits”, listed above, includes:

\$ _____ Transferred to Payroll Account
\$ _____ Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as “Ending Balance” on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5A

CHECK REGISTER - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-pmb

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

NAME OF BANK: First Republic Bank BRANCH: _____

ACCOUNT NAME: Greenberg Georgia Film and TV Studio Holdings LLC (Operating)

ACCOUNT NUMBER: x 1088

PURPOSE OF ACCOUNT: OPERATING

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

	CHECK			
<u>DATE</u>	<u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
	See attached			
TOTAL				\$



101 Pine Street
San Francisco, CA. 94111
(800) 392-1400

GREENBERG GEORGIA FILM AND TV STUDIO
HOLDINGS LLC
(OPERATING ACCOUNT)
10000 SANTA MONICA BLVD
UNIT 602
LOS ANGELES CA 90067--7008

Account Number
1088
Statement Period
03/30/21 To 04/30/21

**BUSINESS ANALYZED
CHECKING**

1088

Account Summary

Beginning Balance	\$0.00	Average Daily Balance	\$219,293.47
Total Deposits	\$483,326.07	Minimum Balance	\$126,305.35
Total Withdrawals and Debits	\$162,860.13	Service Charges	\$0.00+
Total Checks Paid	\$14,172.00	Interest Earned This Statement Period	\$0.00
Ending Balance	\$306,293.94		

Account Activity

Date	Description	Amount
	Deposits and Credits	
04/01	INCOMING WIRE WILLIAM AREU	\$143,000.00
04/08	INTERNET TRANSFER FROM DDA#XXXXXXX6300 ON 04/08 AT 14.57	\$30,000.00
04/22	INTERNET TRANSFER FROM DDA#XXXXXXX6300 ON 04/22 AT 15.13	\$262,000.00
04/26	INCOMING WIRE WILLIAM AREU	\$48,326.07
	Total Deposits and Credits	\$483,326.07
	Withdrawals and Debits	
04/13	DOMESTIC ONLINE WIRE AREU STUDIOS LLC	\$4,000.00-
04/15	ACH DEBIT HUMANA, INC./INS PYMT ID#721008425001721	\$6,540.05-
04/19	ACH DEBIT GAS SOUTH/8774724932 ID#2MVXGICLV54D3RE	\$2,155.25-
04/20	ACH DEBIT GPC/GPC EBILL ID#0885352063GRB	\$532.33-
04/20	ACH DEBIT ATT 800-452-2248/AT&T BUS ID#8310008576346	\$755.11-
04/20	ACH DEBIT ATT 800-452-2248/AT&T BUS ID#8310008576329	\$1,925.11-

04/20	ACH DEBIT GPC/GPC EBILL ID#0089488031GRB	\$2,143.38-
04/20	ACH DEBIT GPC/GPC EBILL ID#2271550088GRB	\$3,287.19-
04/20	ACH DEBIT GPC/GPC EBILL ID#0402153048GRB	\$7,199.30-
04/20	ACH DEBIT GPC/GPC EBILL ID#1995951062GRB	\$8,060.67-
04/20	ACH DEBIT CNA ACH/PREM-PYMT ID#3035180450	\$10,096.26-
04/23	DOMESTIC ONLINE WIRE OZZIE AREU	\$21,000.00-
04/23	DOMESTIC ONLINE WIRE YOUSAF MALHANCE	\$285.00-
04/27	DOMESTIC ONLINE WIRE AREU STUDIOS LLC	\$11,000.00-
04/29	DOMESTIC ONLINE WIRE SOPHIA-HELLENA PRODUCTIONS INC	\$20,833.74-
04/29	DOMESTIC ONLINE WIRE ROBL LAW GROUP LLC	\$9,722.22-
04/29	DOMESTIC ONLINE WIRE ROBL LAW GROUP LLC	\$5,208.33-
04/29	DOMESTIC ONLINE WIRE OZZIE AREU	\$21,000.00-
04/29	DOMESTIC ONLINE WIRE BERNARD AND MARY ANN PALMER	\$25,000.00-
04/29	ACH DEBIT WASTE MANAGEMENT/INTERNET -043000097981606	\$581.48-
04/29	ACH DEBIT CITY OF ATL - WA/4045460311 ID#2MY4AVWMKY2BCPW	\$1,305.48-
04/30	ACH DEBIT DIRECTV/DIRECTV ID#9408986	\$229.23-
Total Withdrawals and Debits		\$162,860.13

Checks Paid		* Gap in check sequence
Number	Date	Amount
10001	04/28	\$14,172.00-

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-pmb

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: First Republic Bank BRANCH: _____

ACCOUNT NAME: Greenberg Georgia Film and TV Studio Holdings LLC ACCOUNT NUMBER: x 6300

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$ 88,627.14
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

*Debit cards are used by _____

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not includes items reported as Petty Cash on Attachment 4D: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

“Total Amount of Outstanding Checks and other debits”, listed above, includes:

\$ _____ Transferred to Payroll Account
\$ _____ Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as “Ending Balance” on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

CHECK REGISTER - OPERATING ACCOUNT

PURPOSE OF ACCOUNT: OPERATING

	CHECK NUMBER	PAYEE	PURPOSE	AMOUNT
DATE	See attached			
TOTAL				\$



101 Pine Street
San Francisco, CA. 94111
(800) 392-1400

GREENBERG GEORGIA FILM AND TV STUDIO
HOLDINGS LLC
10000 SANTA MONICA BLVD
UNIT 602
LOS ANGELES CA 90067--7008

Account Number
6300
Statement Period
04/01/21 To 04/30/21

BUSINESS ANALYZED CHECKING

6300

Account Summary

Beginning Balance	\$5,000.00	Average Daily Balance	\$18,901.85
Total Deposits	\$375,627.14	Minimum Balance	\$1,100.00
Total Withdrawals and Debits	\$292,000.00	Service Charges	\$0.00+
Total Checks Paid	\$0.00	Interest Earned This Statement Period	\$0.00
Ending Balance	\$88,627.14		

Account Activity

Date	Description	Amount
	Deposits and Credits	
04/02	INCOMING WIRE VT1 PRODUCTIONS INC	\$26,100.00
04/21	ACH CREDIT LE CINELEASE INC/PAYMENTS ID#13668	\$262,070.00
04/30	INCOMING WIRE VT1 PRODUCTIONS INC	\$87,457.14
	Total Deposits and Credits	\$375,627.14
	Withdrawals and Debits	
04/08	INTERNET TRANSFER TO DDA#XXXXXXXX1088 ON 04/08 AT 14.57	\$30,000.00-
04/22	INTERNET TRANSFER TO DDA#XXXXXXXX1088 ON 04/22 AT 15.13	\$262,000.00-
	Total Withdrawals and Debits	\$292,000.00

ATTACHMENT 4B

MONTHLY SUMMARY OF BANK ACTIVITY - PAYROLL ACCOUNT N/A

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity.
A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Ending Balance per Bank Statement	\$ _____
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

***Debit cards must not be issued on this account.**

****If Closing Balance is negative, provide explanation:** _____

The following disbursements were paid by Cash: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-payroll disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5B

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Account for all disbursements, including voids, lost payments, stop payment, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

	CHECK NUMBER	PAYEE	PURPOSE	AMOUNT
TOTAL				\$

ATTACHMENT 4C

MONTHLY SUMMARY OF BANK ACTIVITY - TAX ACCOUNT N/A

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found on the United States Trustee website, <http://www.usdoj.gov/ust/r21/index.htm>.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: TAX

Ending Balance per Bank Statement	\$	_____
Plus Total Amount of Outstanding Deposits	\$	_____
Minus Total Amount of Outstanding Checks and other debits	\$	_____*
Minus Service Charges	\$	_____
Ending Balance per Check Register	\$	_____**(a)

***Debit cards must not be issued on this account.**

****If Closing Balance is negative, provide explanation:** _____

The following disbursements were paid by Cash: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-tax disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5C

CHECK REGISTER - TAX ACCOUNT N/A

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT # _____

PURPOSE OF ACCOUNT: TAX

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer-generated check register can be attached to this report, provided all the information requested below is included.

<http://www.usdoj.gov/ust>

CHECK		PAYEE	PURPOSE	AMOUNT
DATE	NUMBER			
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL _____(d)

SUMMARY OF TAXES PAID

Payroll Taxes Paid _____(a)
Sales & Use Taxes Paid _____(b)
Other Taxes Paid _____(c)
TOTAL _____(d)

- (a) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5O).
(b) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5P).
(c) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5Q).
(d) These two lines must be equal.

ATTACHMENT 4D

INVESTMENT ACCOUNTS AND PETTY CASH REPORT N/A

INVESTMENT ACCOUNTS

Each savings and investment account, i.e. certificates of deposits, money market accounts, stocks and bonds, etc., should be listed separately. Attach copies of account statements.

Type of Negotiable

Instrument	Face Value	Purchase Price	Date of Purchase	Current Market Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL _____(a)

PETTY CASH REPORT N/A

The following Petty Cash Drawers/Accounts are maintained:

Location of Box/Account	(Column 2) Maximum Amount of Cash in Drawer/Acct.	(Column 3) Amount of Petty Cash On Hand At End of Month	(Column 4) Difference between (Column 2) and (Column 3)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL \$ _____(b)

For any Petty Cash Disbursements over \$100 per transaction, attach copies of receipts. If there are no receipts, provide an explanation _____

TOTAL INVESTMENT ACCOUNTS AND PETTY CASH(a + b) \$ _____(c)

(c)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 6

MONTHLY TAX REPORT

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

TAXES OWED AND DUE

Report all unpaid post-petition taxes including Federal and State withholding FICA, State sales tax, property tax, unemployment tax, State workmen's compensation, etc.

Name of Taxing Authority	Date Payment Due	Description	Amount	Date Last Tax Return Filed	Tax Return Period
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
TOTAL			<u>\$</u> _____		

ATTACHMENT 7

SUMMARY OF OFFICER OR OWNER COMPENSATION

SUMMARY OF PERSONNEL AND INSURANCE COVERAGES

Name of Debtor: Areu Studios, LLC Case Number: 20-71228-PMB

Reporting Period beginning 4/1/2021 Period ending 4/30/2021

Report all forms of compensation received by or paid on behalf of the Officer or Owner during the month. Include car allowances, payments to retirement plans, loan repayments, payments of Officer/Owner's personal expenses, insurance premium payments, etc. Do not include reimbursement for business expenses Officer or Owner incurred and for which detailed receipts are maintained in the accounting records.

<u>Name of Officer or Owner</u>	<u>Title</u>	<u>Payment Description</u>	<u>Amount Paid</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONNEL REPORT

	Full Time	Part Time
Number of employees at beginning of period	_____	_____
Number hired during the period	_____	_____
Number terminated or resigned during period	_____	_____
Number of employees on payroll at end of period	_____	_____

CONFIRMATION OF INSURANCE

List all policies of insurance in effect, including but not limited to workers' compensation, liability, fire, theft, comprehensive, vehicle, health and life. For the first report, attach a copy of the declaration sheet for each type of insurance. For subsequent reports, attach a certificate of insurance for any policy in which a change occurs during the month (new carrier, increased policy limits, renewal, etc.).

<u>Agent and/or Carrier</u>	<u>Phone Number</u>	<u>Policy Number</u>	<u>Coverage Type</u>	<u>Expiration Date</u>	<u>Date Premium Due</u>
<u>See attached</u>	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

The following lapse in insurance coverage occurred this month:

<u>Policy Type</u>	<u>Date Lapsed</u>	<u>Date Reinstated</u>	<u>Reason for Lapse</u>
_____	_____	_____	_____
_____	_____	_____	_____

☐ Check here if U. S. Trustee has been listed as Certificate Holder for all insurance policies.

Agent and/or Carrier	Phone Number	Policy Number	Coverage Type	Expiration Date	Date Premium Due
USI Insurance Services, LLC CL	470-428-9771	6072832096	Property	12/6/2021	
			Commercial General		
USI Insurance Services, LLC CL	470-428-9771	7011985566	Liability	12/6/2021	
USI Insurance Services, LLC CL	470-428-9771	6075831980	Auto Liability	12/6/2021	
USI Insurance Services, LLC CL	470-428-9771	6075831994	Umbrella Liability	12/6/2021	
USI Insurance Services, LLC CL	470-428-9771	6072832101	Workers Compensation	12/6/2021	

ACORDTM**EVIDENCE OF PROPERTY INSURANCE**DATE (MM/DD/YYYY)
12/03/2020

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY USI Insurance Services, LLC CL 1 Concourse Pkwy NE Suite 700 Atlanta, GA 30328		PHONE (A/C, No, Ext): 470-428-9771	COMPANY Continental Casualty Company 151 N. Franklin Street Chicago, IL 60606	
FAX (A/C, No):	E-MAIL ADDRESS: lauren.cunningham@usi.com			
CODE:		SUB CODE:		
AGENCY CUSTOMER ID #: 1721988				
INSURED Good Deed 317, LLC 2796 Continental Colony Parkway SW Atlanta, GA 30331		LOAN NUMBER 00369		POLICY NUMBER 6072832096
		EFFECTIVE DATE 12/06/20	EXPIRATION DATE 12/06/21	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:				

PROPERTY INFORMATION**LOCATION/DESCRIPTION****RE: 2796 Continental Colony Parkway SW, Atlanta, GA 30331**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

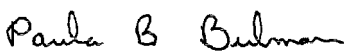
COVERAGE INFORMATION	PERILS INSURED	BASIC	BROAD	SPECIAL	<input checked="" type="checkbox"/> Special
-----------------------------	-----------------------	--------------	--------------	----------------	--

COVERAGE/PERILS/FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Blanket Building	\$30,452,000	\$50,000
Blanket Business Personal Property	\$1,000,000	\$50,000
Blanket Business Income & Extra Expense	\$4,600,000	24 hours
Cause of Loss: Special		
Valuation: Replacement Cost		

REMARKS (Including Special Conditions)**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

NAME AND ADDRESS LV Lending LLC, a Florida Limited Liability Company, ISAOA, ATIMA 175 SW 7th Street, Suite 2101 Miami, FL 33130	ADDITIONAL INSURED <input checked="" type="checkbox"/> MORTGAGEE	LENDER'S LOSS PAYABLE	LOSS PAYEE
	LOAN # 00369		
	AUTHORIZED REPRESENTATIVE 		

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ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/03/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER USI Insurance Services, LLC CL 1 Concourse Pkwy NE Suite 700 Atlanta, GA 30328	CONTACT NAME: Lauren Cunningham PHONE (A/C, No, Ext): 470-428-9771 FAX (A/C, No): E-MAIL ADDRESS: lauren.cunningham@usi.com														
INSURED Good Deed 317, LLC 2796 Continental Colony Parkway SW Atlanta, GA 30331	<table border="1"> <thead> <tr> <th data-bbox="803 430 1437 451">INSURER(S) AFFORDING COVERAGE</th> <th data-bbox="1437 430 1576 451">NAIC #</th> </tr> </thead> <tbody> <tr> <td data-bbox="803 451 1437 472">INSURER A : Valley Forge Insurance Company</td> <td data-bbox="1437 451 1576 472">20508</td> </tr> <tr> <td data-bbox="803 472 1437 493">INSURER B : Continental Insurance Company</td> <td data-bbox="1437 472 1576 493">35289</td> </tr> <tr> <td data-bbox="803 493 1437 514">INSURER C : Transportation Insurance Company</td> <td data-bbox="1437 493 1576 514">20494</td> </tr> <tr> <td data-bbox="803 514 1437 535">INSURER D :</td> <td data-bbox="1437 514 1576 535"></td> </tr> <tr> <td data-bbox="803 535 1437 556">INSURER E :</td> <td data-bbox="1437 535 1576 556"></td> </tr> <tr> <td data-bbox="803 556 1437 577">INSURER F :</td> <td data-bbox="1437 556 1576 577"></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Valley Forge Insurance Company	20508	INSURER B : Continental Insurance Company	35289	INSURER C : Transportation Insurance Company	20494	INSURER D :		INSURER E :		INSURER F :	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A : Valley Forge Insurance Company	20508														
INSURER B : Continental Insurance Company	35289														
INSURER C : Transportation Insurance Company	20494														
INSURER D :															
INSURER E :															
INSURER F :															

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			7011985566	12/06/2020	12/06/2021	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$15,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			6075831980	12/06/2020	12/06/2021	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> RETENTION \$ 10,000			6075831994	12/06/2020	12/06/2021	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	6072832101	12/06/2020	12/06/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Loc# 1 - 2796 Continental Colony Parkway SW; Atlanta, GA

CERTIFICATE HOLDER

CANCELLATION

**LV Lending LLC, a Florida
Limited Liability Company,
ISAOA, ATIMA
175 SW 7th Street, Suite 2101
Miami, FL 33130**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Paula B. Bulman

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ATTACHMENT 8

SIGNIFICANT DEVELOPMENTS DURING REPORTING PERIOD

Information to be provided on this page, includes, but is not limited to: (1) financial transactions that are not reported on this report, such as the sale of real estate (***attach closing statement***); (2) non-financial transactions, such as the substitution of assets or collateral; (3) modifications to loan agreements; (4) change in senior management, etc. Attach any relevant documents.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

We anticipate filing a Plan of Reorganization and Disclosure Statement on or before _____.

**IN THE UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION**

IN RE:

AREU STUDIOS, LLC,

Debtor.

CHAPTER 11

CASE NO. 20-71228-PMB

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on the date indicated below a true and correct copy of the foregoing Monthly Operating Report was served via the Bankruptcy Court's Electronic Case Filing program, which sends a notice of and accompanying link to the pleading to the following parties who have appeared in this case under the Bankruptcy Court's Electronic Case Filing Program:

- **Jonathan S. Adams** jonathan.s.adams@usdoj.gov
- **Matthew R. Brooks** matthew.brooks@troutmansanders.com
- **Garrett A. Nail** gnail@pgnlaw.com
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- **Shawna Staton** shawna.p.staton@usdoj.gov
- **Thomas R. Walker** thomas.walker@fisherbroyles.com

This 22nd day of June, 2021.

JONES & WALDEN LLC

/s/ Cameron M. McCord
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